U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is manufactory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U -

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

	1/ 01 / 04 Inrough: 12/ 31 / 04			
3. Name and address of person filing.	Name, file number, and address of labor organization.			
Name Rickie Allan Feaster	Name IUOE Local 132			
	Labor Organization File Number 027453			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any			
PO Box 983				
Street	Street 606 Tennessee Avenue			
<sup>City</sup> Petersburg	City Charleston			
State West Virginia ZIP Code + 4 26847	State West Virginia ZIP Code + 4 25362-0770			
5. Position in labor organization.				
Trustee - Business Agent				
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):				
A. Held an interest in, engaged in transactions (including loans) with, monetary value from an employer whose employees your organize				
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
	7.b. Amount.			
Street				
City	\$.00			
State ZIP Code + 4				
s	Signature			
	y of Perjury and other applicable penalties of the law, that all of the information panying documents), has been examined by the signatory and is, to the best of the a section on penalties in the instructions.)			

Rickee a. Fearto

Telephone Number

Name of Person Filing	File Number U- <i>Q155</i>

	B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is active. (2) any part of which consists of buying from or selling or leasing directly or ind dealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or lirectly to, or otherwise
	8. Name and address of Business (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer
	Street City State ZIP Code + 4	o. Employer
	10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any	11.a. Nature of such dealing.
	Street City State ZIP Code + 4	11.b. Approximate dollar value of such dealing. \$,00  12.a. Nature of interest held or income received.
	C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money  13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	12.b. Amount. \$.00 er parts A and B above) or other thing of value.  14.a. Nature of payment.
	Rincluding trade name, it any).	

\$.00

\$.00

14.b. Amount of payment.

Street

City

State

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

13.b. Is the Business an Employer

ZIP Code + 4

or Consultant

?